

OFFICE OF THE SHERIFF Lake County, Illinois

JOHN D. IDLEBURG **SHERIFF**

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Public Comment Notice

Name:	Email:
Cell Phone:	
Address:	City:
Date of Incident:	Time of Incident:
Location of Incident:	
Department Member's Name:	
Details:	
I certify the statements contained in this document are	true and correct to the best of my knowledge and belief.
Signature:	Date: